### Prication Number 10/568,240   Filing Date   February 14, 2006   First Named Inventor: Naomi NISHIKATA   Service	<b>8</b>											
Filing Date   Filing Date   February 14, 2006   Filing Named Inventor.   Somin INSHIKATA   2617   Sominary 14, 2006   February 14, 2006   Februa	AMENDMENT TRANSMITTAL LETTER											
Transmitted herewith is an amendment in the above-identified application, including:   (X)							ntor:	Group Art Unit				
TO THE COMMISSIONER FOR PATENTS  Transmitted herewith is an amendment in the above-identified application, including: (X) Amendment and Response; (X) Amendment Transmittal (in duplicate); (X) Petition for Extension of Time (in duplicate); (X) PEEN COLLING (In duplicate); (X) PEEN COLLING (In duplicate); (X) Petition for Extension of Time (in duplicate); (X) Pet	Invention Title				9							
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(X) Amendment Transmittal (in duplicate); (X) Petition for Extension of Time (in duplicate); (X) Replacement Drawings (Figs. 4-8 and 10-13); (X) PTO Form 2038; and (X) Return Postcard  CLAIMS AS AMENDED  (1) (2) (3)  CLAIMS REMAINING AFTER PREVIOUSLY EXTRA NUMBER PREVIOUSLY EXTRA NUMBER PREVIOUSLY PAID FOR STAR AMENDMENT  TOTAL CLAIMS 18 Minus 27 0 x \$ 50 \$  INDEPENDENT CLAIMS 6 Minus 5 1 x \$210 \$ 210  MULTIPLE DEPENDENT \$370 \$  If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.  If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the highest number previously paid for Total Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 1 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 1 is less than 3, enter "3." The "highest number previously paid for Independent Claims in column 1 is less than 20, enter "3."  The "highest number previously paid for Independent Claims in column 1 is less than 3, enter "3."  The "highest number previously paid for Independent Claims in column 1 is less than 3, enter "3."  The "highest number previously paid for I	Transmitted herewith is an amendment in the above-identified application, including:											
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P.O. Box 1450, Alexandria, VA 22313-1450 on August 21, 2008.  Date	//////////////////////////////////////						envelope addressed to: Mail Stop					
August 21, 2008 Date	Donald W. Muirhead, Reg. No. 33, 978						P.O. Box 1450, Alexandria, VA 22313-1450					
$\frac{\sqrt{\sqrt{m^3}}}{\sqrt{m^3}}$	August 21, 2008						5/ ingust 21, 2000.					
							Sandra Pires					

Customer No. 54004

APENDMENT TRANSMITTAL LETTER

Docket Number VPM-00101

Filing Date First Named Inventor: Naomi NISHIKATA

Invention Title MOBILE COMMUNICATION TERMINAL AND APPLICATION PROGRAM

TO THE COMMISSIONER FOR PATENTS

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- (X) Replacement Drawings (Figs. 4-8 and 10-13);
- (X) PTO Form 2038; and
- (X) Return Postcard

## **CLAIMS AS AMENDED**

(1) (2) **CLAIMS HIGHEST PRESENT** RATE FEE REMAINING **NUMBER** NUMBER **AFTER PREVIOUSLY EXTRA AMENDMENT** PAID FOR **TOTAL CLAIMS** Minus 18 0 27 x \$ 50 \$ INDEPENDENT CLAIMS 6 Minus 5 1 x \$210 \$ 210 MULTIPLE DEPENDENT \$ \$370 **CLAIM ADDED TOTAL** \$ If applicant has small entity status under 37 CFR 1.9 and **SMALL ENTITY TOTAL** \$ 210 1.27, then divide total fee by 2, and enter amount here.

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the highest number previously paid for Total Claims in column 2 is less than 20, enter "20."
- \*\*\* If the highest number previously paid for Independent Claims in column 2 is less than 3, enter "3." The "highest number previously paid for" (total or independent) is the highest number found in the appropriate box in column 1.
  - ( ) Please charge **Deposit Account Number 503596** in the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is enclosed.
  - (X) Please charge \$ 210 to our credit card. Attached is PTO Form 2038.
  - ( ) A check in the amount of \$\_\_\_\_\_ to cover the filing fee is enclosed.
  - Please credit any overpayment and/or charge any additional filing fees required under 37 CFR §§ 1.16 and 1.17 to our **Deposit Account Number 503596.**

Donald W. Muirhead, Reg. No. 33, 978

August 21, 2008

Date

Customer No. 54004

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 21, 2008.

Sandra Pires